

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 331008	RECEIPT DATE:	06 / 14 /
IA NUMBER:	PCT/ JP97 / 04611	IA FILING DATE:	12 / 15 /
FAMILY NAME:	SHIMIZU	DELAY WAIVED (Y/N):	
GIVEN NAME:	ERIKO	DEMAND RECEIVED (Y/N):	
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	12 / 17 /
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	
ATTORNEY DOCKET NUMBER:		COUNTRY:	JPX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	
NAME:	ERIKO SHIMUZU		
STREET:	21 29 TSUNASHIMANISHI 5 CHOME		
CITY:	KANAGAWA		
STATE/COUNTRY:	JPX	ZIP:	2230053
EMAIL:			
APPLICATION TITLES:			
	ELECTRONIC ZOOM IMAGE INPUT METHOD		

TAB TO LAST POSITION, PUSH SEND